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Thesis

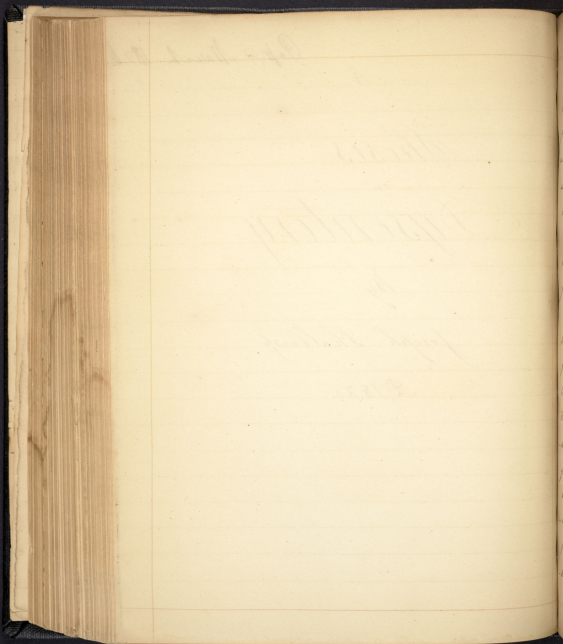
on

Dysentery

by

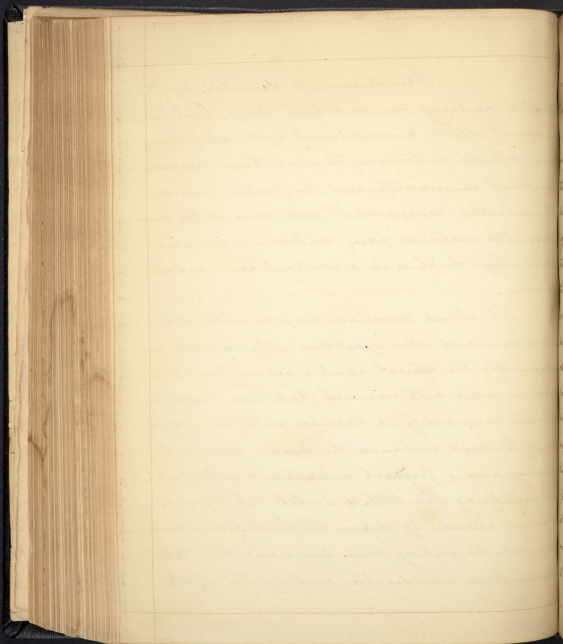
Joseph Shallop

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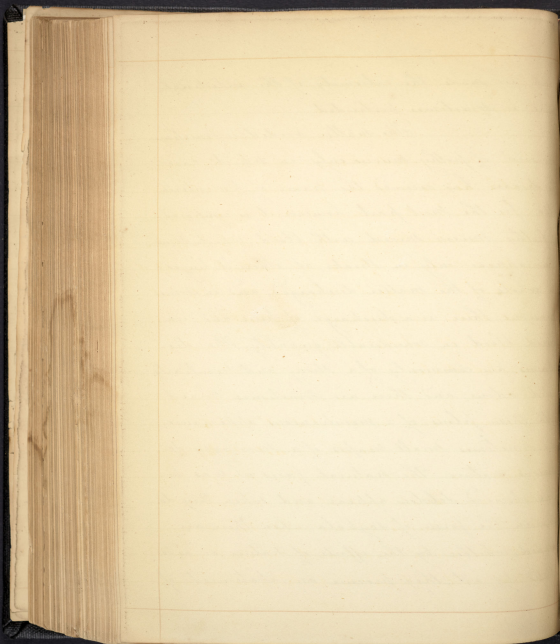
This disease is described by Dr Cullen, as being one in which the patient has frequent stools, accompanied by much griping, and followed by tenesmus, the stool, though frequent, are small in quantity, and the matter voided is generally mucus mixed with blood, at the same time, the natural faces seldom appear and when they do it is in a compact and hardened form.

The attack sometimes comes on with cold shiverings, and other symptoms of Pyrexia, but more frequently the topical affection appears first, the belly is costive with unusual flatulence, sometimes, though more rarely, a Diarrhoea is the first appearance, In most instances the disease begins with griping, and a frequent inclination to go to stool, in indulging this little is voided, but some tenesmus attends, by degrees the stools become more frequent, the griping more severe, and the tenesmus more considerable, and by the efforts



which are made, the extremity of the intestinal canal is sometimes protruded.

The matter voided is sometimes composed of frothy mucus only, in which case the disease has received the name of Dysentery alba. for the most part however, it is composed of frothy mucus mixed with blood, which sometimes appears only in streaks, at others it tinges the whole of the matter discharged, and on some occasions, there is a discharge of pure and unmixed blood in considerable quantity. The discharges, are commonly of a strong and peculiarly fetid odour, and there are sometimes mixed with them, films, of a membranous appearance, and sometimes small masses of a seemingly sebaceous nature. The natural faeces as was before observed seldom appear, and when they do it is in the form of scybala when these are voided, whether by the efforts of nature, or as solicited by art, they procure an abatement of

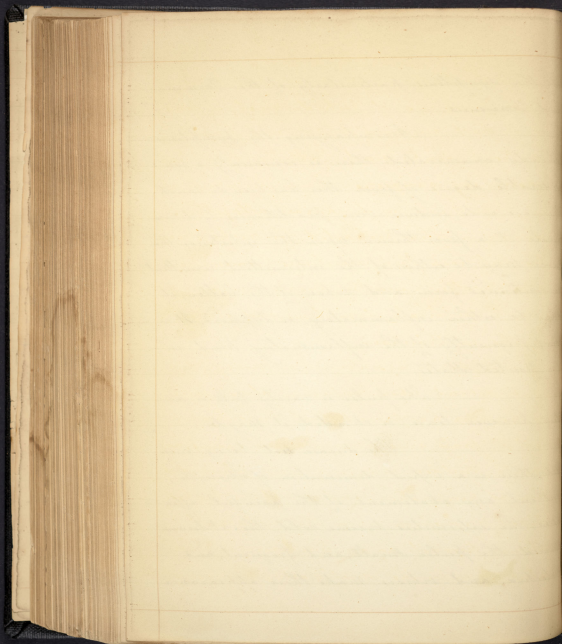


all the symptoms, particularly of the *Tormina*
and *Genesmus*.

Accompanying the symptoms
already enumerated, there is commonly a con-
siderable degree of fever, this has been so much
the case as to induce some practitioners to denom-
inate it a fever thrown upon the intestines. the
fever may be either of the intermittent, remittent,
or continued form, and when of the latter, it
may be either inflammatory, or Typhoid. It is
most frequently of the inflammatory kind in
the United States.

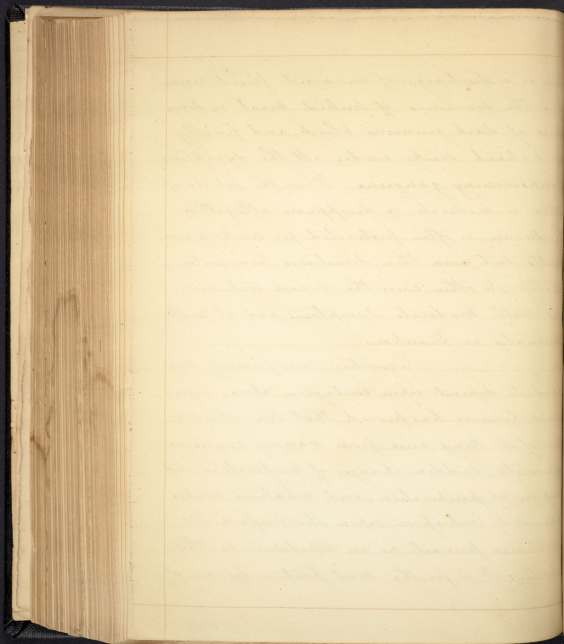
The pulse is rarely full, or ac-
tive, however tense or chorded it may be.

The disease not being anes-
thetized, there is a rapid diminution of strength,
without any abatement of the painful affec-
tions, the extremities become cold, the abdomen
tended, the pulse small, and frequent, and the
Petechia, and vibices, make their appearance.



there is a discharge of an acrid fluid, resembling the washings of putrid meat, or sometimes of dark grumous blood, and finally the patient sinks, under all the symptoms of supervening gangrene. When the febrile affection is moderate, or disappears altogether, the disease is often protracted for weeks, or even months but even then, sometimes terminates fatally. In other cases the disease continues long with moderate symptoms, and at length terminates in Diarrhoea.

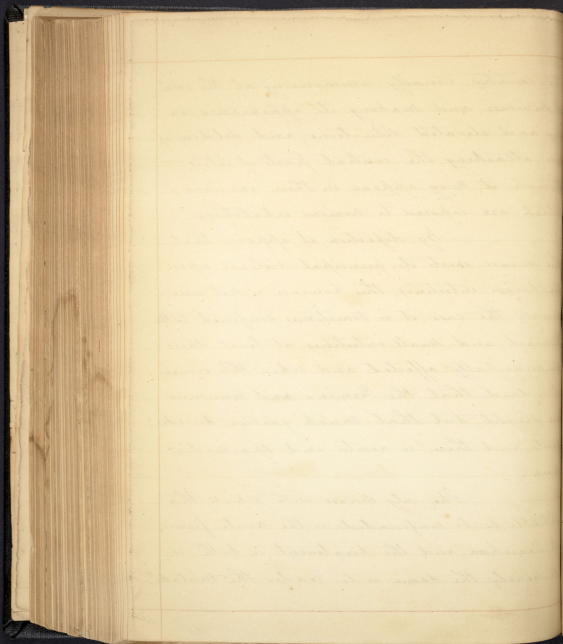
Dysentery was formerly supposed to depend upon contagion alone, experience however has proved, that the ordinary form of it may arise from various causes, as miasmata, sudden changes of temperature, suppression of perspiration, and whatever makes a decided impression upon the surface. It sometimes prevails as an Epidemic in this country, It is for the most part a disease of



the country, usually commencing at the end of summer, and making its appearance in dry and elevated situations, and seldom if ever attacking the central parts of cities, though it may appear in their environs, which are exposed to noxious exhalations.

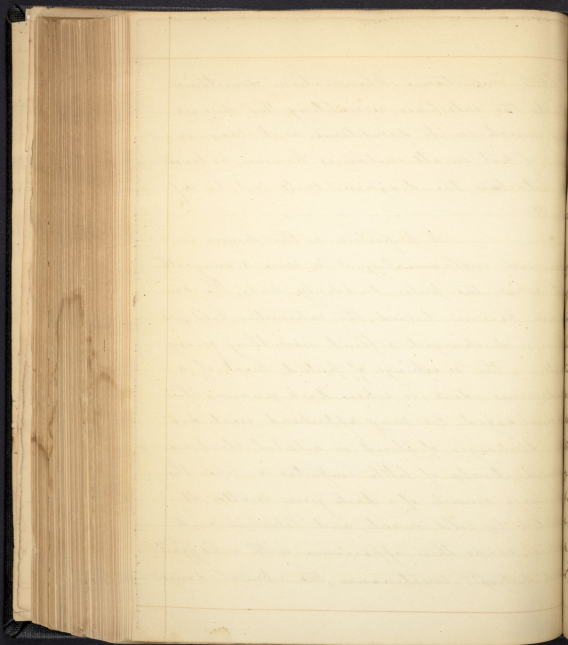
By dissection, it appears that this disease exerts its principal violence upon the larger intestines, this however is not uniformly the case, it is sometimes confined to the stomach, and small intestines, at least these are principally affected and when this occurs, it is said that the Vermine and Tenesmus are slight, but that much gastric disorder exists, and there is acute and spasmodic pain.

The only disease with which this is liable to be confounded, is the acute form of Diarrhoea, and the treatment in both is so nearly the same as to render the mistake



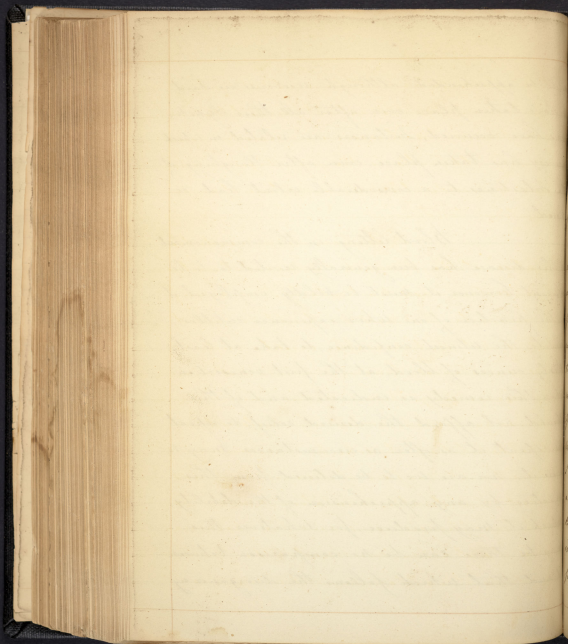
of little importance. Rheumatism sometimes attacks the intestines, resembling this disease very much in its symptoms. as it may in most, if not in all instances however be traced to metastasis, the diagnosis will not be difficult.

In proportion as the disease is open and inflammatory, it is more manageable. but when the pulse suddenly sinks, the abdomen becomes tumid, the extremities cold, and there is discharged a fluid resembling greasy water, or the washings of putrid meat, of a cadaverous odour, or when dark grumous blood is discharged, we may apprehend great danger. discharges of florid, or arterial blood, are comparatively of little importance. when the discharge consists of a dark green matter, attended by cold sweats, and Petechia and vibices, make their appearance, with a haggard and distressed countenance, the utmost danger



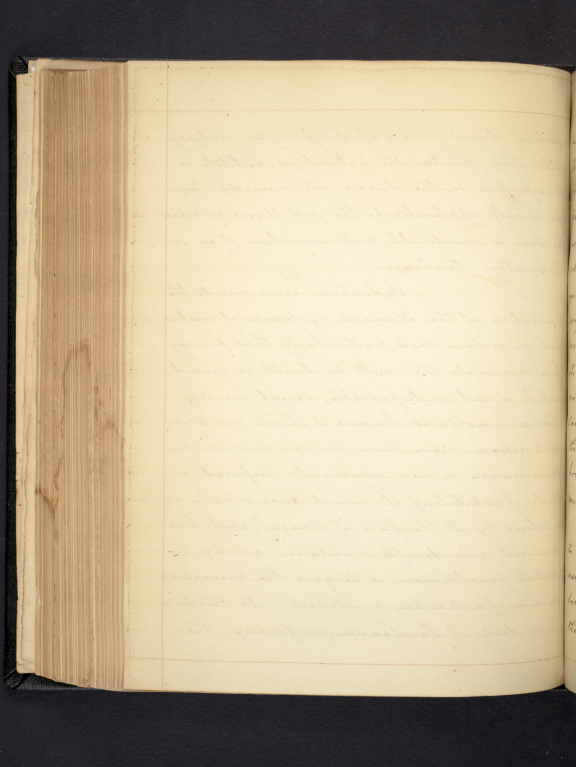
is to be apprehended although recoveries are said to have taken place even after all these symptoms have occurred, instances are related in which recovery has taken place, even after Houghing of the Intestines to a considerable extent had occurred.

Blood letting in the commencement of this disease has been generally resorted to, to be efficient however it must be boldly employed, it is the practice of one whose experience entitles him to the utmost confidence, to take at least twenty ounces of blood, at the first venesection, when this remedy is indicated, and if this should not afford the desired relief, to repeat the repeat it as often as circumstances may require it, nor are we to be deterred from this practice by any apprehension of the debility, which it may produce, for whatever this may be there can be no comparison between it, and that which follows the disorganizing



effects of disease, small bleedings on the contrary whilst they weaken the patient, make little or no impression on the disease. This remedy however is only applicable to the first stages, or when the fever is considerable, with symptoms of an inflammatory tendency.

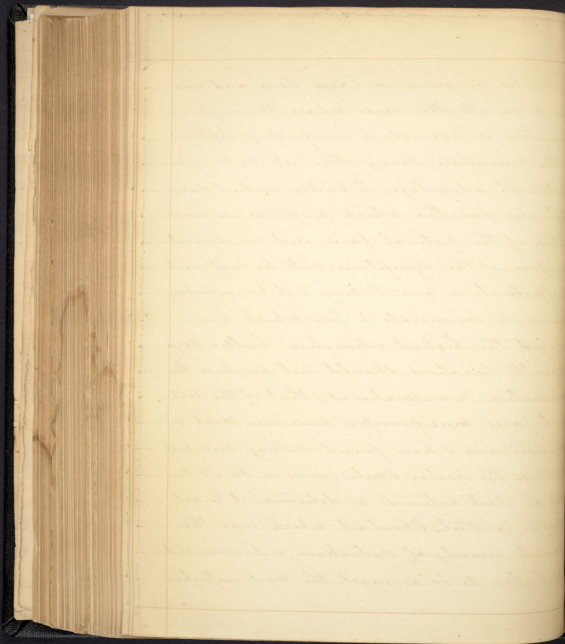
Sydenham recommends the evacuation of the stomach by means of emetics and in certain cases, particularly those arising from miasmata, this will no doubt be found useful if not indispensable, except under these circumstances however I should not place much reliance upon them, for this purpose the Ipecacuanha is now commonly preferred, a mode of exhibiting it which was introduced I believe by Dr Playfair of Bengal, and has acquired considerable reputation, among the British practitioners, is to give the Ipecacuan in doses of a drachm. combined with thirty or forty drops of Laudanum, confining the



patient to a horizontal position, and if vom-
iting is excited repeating the dose. Dr Cullen
observes that "if the emetics employed do not
operate also by stool they are of little im-
portance." Dr Barton however, in a note to his
edition of Cullen's practice says "we have fre-
quently found this article, (Specac) eminently
usefull in Dysentery, when being combined
with opium it did not shew in any degree
its laxative operation. The Antimonials, do
not appear to have gained so high a repu-
tation in this disease as the Specacuanha,
there is one of the preparations of Antimony
however (the cerated glass) which has been
much praised in some of the British journals

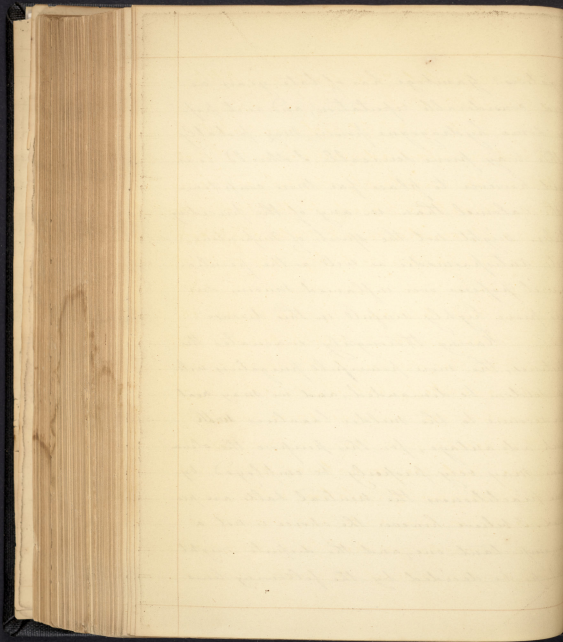
A resort to purgatives, in order
to clear the alimentary canal has been the
usual practice, and its propriety is now I
believe generally admitted, for this purpose
the castor oil has commonly been resorted to

it should be given in large doses, and even then as in all other cases where thorough evacuation is required, it is infinitely inferior to the Mercurials. Many other articles may be used with advantage, Dr Cullen indeed says that any laxative which produces an evacuation of the natural faeces, and consequent remission of the symptoms, will be sufficient to effectuate a cure. It may not be improper however, to enumerate a few which have enjoyed the highest estimation. Cullen says if gentle laxatives should not produce the evacuation now mentioned, that of the natural faeces, more powerful medicines must be employed, and I have found nothing more proper than the Tartar Emetic, given in small doses and at such intervals as determine it to act chiefly by Stool, Rheubarb which was the favourite remedy of Sydenham, is pronounced by Cullen to be amongst the most improper



purgatives? Gamboge, has of late years acquired considerable reputation, and as it possesses some hydragogue powers, may probably in this way prove serviceable. I should be inclined however to place far more confidence in the Calomel than in any of the preceding articles. Might not the spirit of Turpentine by its antispasmodic as well as the peculiar power it possesses over inflamed mucous surfaces prove highly useful in this disease?

Having thoroughly evacuated the intestines, the more powerful purgatives will now seldom be demanded, and we may next have recourse to the milder laxatives with much advantage, for this purpose the oleum Ricini may very properly be employed, by some practitioners the neutral Salts are preferred. I believe however the choice is not a very important one, and the dispute might perhaps be decided by the following lines

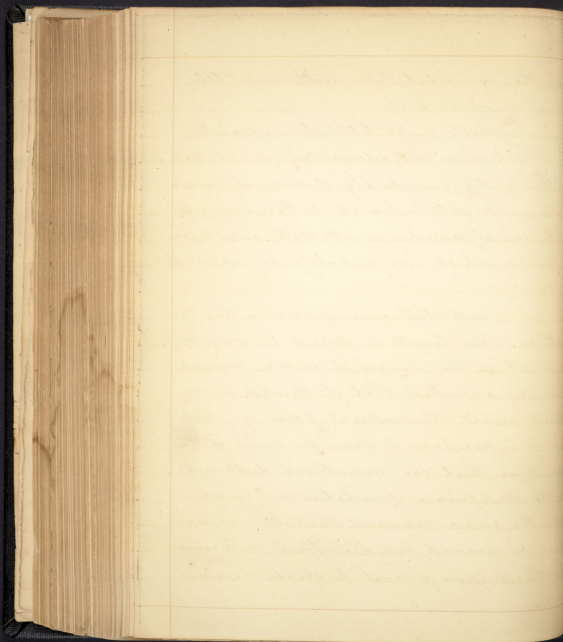


from the immortal Pope, with very little alteration of the first.

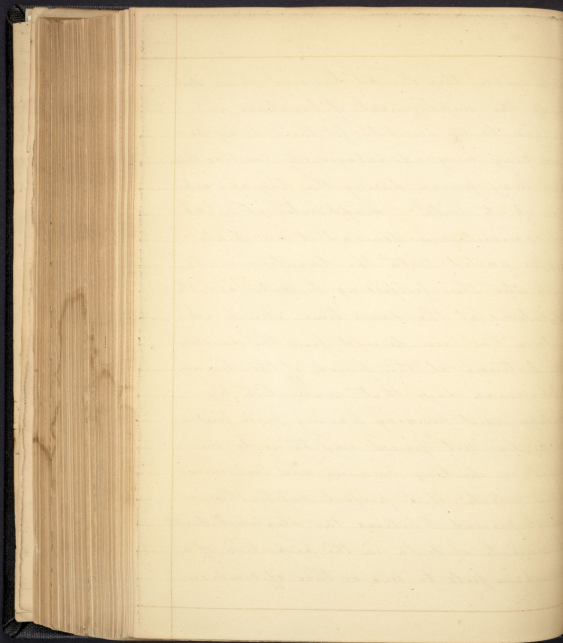
For Latts or Oil let Sectaries contest

Which ever is best administered is best. Not a little of the uncertainty of Medical Science, I believe, might be traced to the indiscriminate use of remedies, in all states, and stages of disease, which were probably only applicable to one.

Much difference of opinion has existed as to the length to which purging should be carried in this disease, it is now however generally admitted, that it should be continued untill the natural forces are restored. It is necessary to bear in mind in the mean time, that the unnatural discharges are the consequence of irritation acting upon the prima via, and that the cause must be removed, ere the effect will cease for this purpose, a resort to opiates becomes



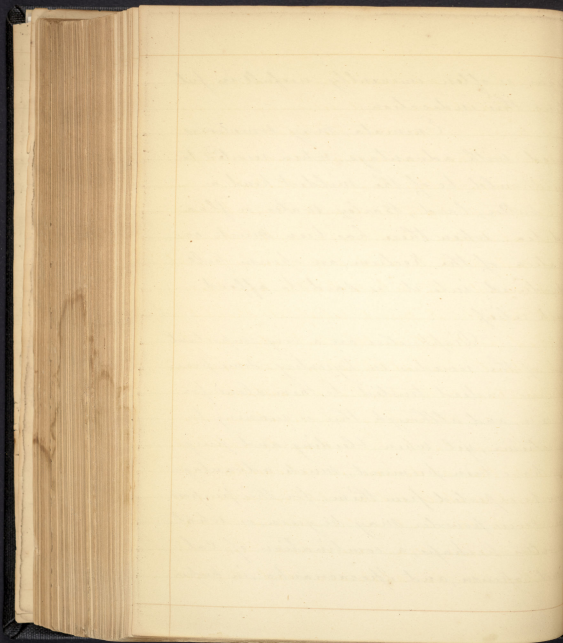
indispensable, they should however never supercede the employment of laxatives, and there can be no necessity for their doing so as we may very advantageously combine them or we may purge during the day, and exhibit an opiate with a diaphoretic at night, or if circumstances demand it, an opiate may be united with the laxative and diaphoretic, thus fulfilling several valuable indications at the same time. Much advantage has been derived from the Saccharum Saturni at this period of the disease Dr Chapman says that "evacuation by bleeding and purging having been premised he has not found any thing so successful in checking Tormina and Tenismus as this article: of its perfect safety, there is not at present I believe the slightest doubt the muriate of soda, in the proportion of a table-spoon full to two or three of common



vinegar, is often eminently useful in fulfilling this indication.

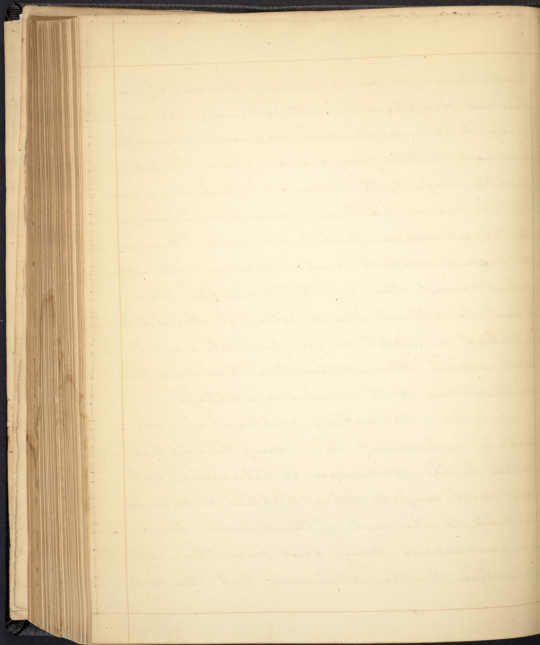
Enemata, may sometimes be used with advantage, when resorted to they should be of the mildest kind, as fresh butter, lard, Barley water, or flax seed tea, when there has been much excoriation of the Rectum, an opium pill introduced into it is said to afford much relief.

Diaphoretics are a very important part of the remedies in Dysentery, some practitioners indeed trusted to them alone for its cure, and although this is running to an extreme, yet when bleeding and purging have been premised, much advantage may be expected from them, for this purpose the Dover's powder may be given, or what is better perhaps, a combination of Calomel, opium, and Ipecacuanha, in proper



proportions, as an auxiliary means of inducing diaphoresis, and relieving the griping when severe and frequent, warmth applied to the surface has been found greatly useful, this may be effected by means of the warm bath, or warm fomentations to the abdomen. pediluvia will likewise be found useful, and a woolen roller applied round the whole trunk, has been said to afford much relief, it should be applied as tight as the patients comfort will admit. This application has been used in Dysentery with decided advantage.

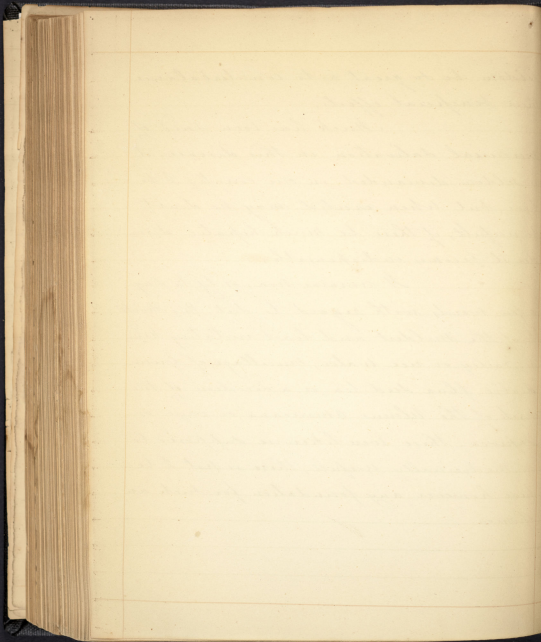
Revincating applications are highly important, they may be applied either to the abdomen or extremities, but are most useful when applied as near as possible to the seat of the disease. Some inconvenience may arise from their application to the abdomen, but this will



seldom be so great as to counterbalance their beneficial effects.

Much has been said of mercurial salivation, in this disease, it is seldom demanded in our country I believe, but when excited may no doubt be useful, if there be much hepatic disorder it becomes indispensable.

It remains now only to say a few words with regard to diet, this should be of the mildest and least irritating kind as barley or rice water, mucilage of Gum Arabic, flax seed tea, or a decoction of the bark of the *Ulmus americana*, or Sago or Tapioca, these were likewise supposed to be medicinally useful, there is not I believe however any foundation for such an opinion.



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WILLIAM JOHNSON

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